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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Complete if Known:	
		Application Number	10/581,491-Conf. #3826
		Filing Date	January 16, 2007
		First Named Inventor	Vesa MYLLYMAEKI
		Examiner Name	L. D. Bland
		Art Unit	1623
TOTAL AMOUNT OF PAYMENT	(\$ 120.00)	Attorney Docket No. 0696-0240PUS1	

METHOD OF PAYMENT (check all that apply)

<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card	<input type="checkbox"/> Money Order	<input type="checkbox"/> None	<input type="checkbox"/> Other (please identify): _____
<input checked="" type="checkbox"/> Deposit Account		Deposit Account Number: 02-2448		Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

<input checked="" type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

FEES CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	310	155	510	255	210	105	
Design	210	105	100	50	130	65	
Plant	210	105	310	155	160	80	
Reissue	310	155	510	255	620	310	
Provisional	210	105	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Small Entity
Each claim over 20 (including Reissues)	50 25
Each independent claim over 3 (including Reissues)	210 105
Multiple dependent claims	370 185

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
19	- 20 =	x	=
HP = highest number of total claims paid for, if greater than 20.			
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
1	- 3 =	x	=
HP = highest number of independent claims paid for, if greater than 3.			

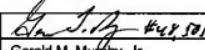
Multiple Dependent Claims**Fee (\$)** **Fee Paid (\$)**

3. APPLICATION SIZE FEE	Fee (\$)	Fee Paid (\$)
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(g).		
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)

- 100 = _____ /50 = _____ (round up to a whole number) x _____ = _____

4. OTHER FEE(S)	Fee Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)	
Other (e.g., late filing surcharge): 1251 Extension for response within first month	120.00

SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	28,977	Telephone	(703) 205-8000
Name (Print/Type)	Gerald M. Murphy, Jr.	Date	APR 04 2008		